PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective October 1, 2003

1068 47134

		CLAIMS A	S FILED - (Column	•	(Column 2)			SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			27					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			27 mir	านร 20=	* 7			X\$ 9=		OR	X\$18=	126
INDEPENDENT CLAIMS			m	inus 3 =	* 0			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PR			RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, ent					"0" in c	column 2	ı	TOTAL		OR	TOTAL	896
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER		HIGHE NUMB PREVIO PAID F	ST SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-OR	=	İ	X\$ 9=	166	OR	X\$18=	1 24
AME	Independent	*	Minus			=		X43=	-	OR	X86=	
	FIRST PRESE	ENTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL ADDIT. FEE	_	OB	TOTAL	
	(Column 1) (Column 2) (Column 3)									10	ADDIT. FEE	
		CLAIMS	1	HIGHE		(Column 3)					<u>1</u>	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	. <u>-</u>	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							L	TOTAL DDIT. FEE			TOTAL ADDIT, FEE	
		^	DDII. FEE		'							
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	···
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.145		Ī	.200-	
* 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+145= TOTAL		OR	+290= TOTAL	
** [1	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								,	OR A	DDIT. FEE	
		ber Previously Paid					foun	d in the app	opriate box	in colu	ımn 1.	